

# Stakeholder Day – July 2018

The psychology challenge – Dr Vanessa Garratt, Paediatric and ACHD Cardiology Psychology Lead

Dr Michelle O'keeffe, Specialist Clinical Psychologist
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## The Service

0.4 wte 2005 - 2015

2017 onwards

3.4 wte in Bristol

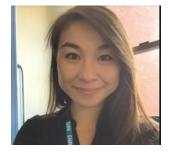
Covering the following lifespan pathways for all families in the network:

- Fetal
- Catheter
- Surgical
- ACHD
- General outpatients













**Equity** 

of access

## Family and young people perspective – "Help us manage the long term psychological affects"

## Exeter and Gloucester listening events and Facebook survey

## We want help around:

- Helping children and young people cope at school
- Marital and relationship support
- Trauma symptoms and memories for hospital admissions
- Helping our child and us cope with hospital admissions
- Access to psychology locally not just in Bristol
- Access to support whilst waiting for a diagnosis
- Support for siblings

### The people we ask for help are:

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care

- The support groups
- CNS team
- GF





## Cardiac Services Listening Event March 2017



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Working with



### Introduction

Thank you for attending our Listening Event. It was wonderful to see so many of you and we really hope you found the event useful.

We wanted to share a brief report with you about what we've learned and what we are planning to do as a result of the event, but also <u>summarise</u> the event to share with families who weren't able to attend.

### What happened?

Session 1 - Feedback from previous events

Mr Parry, Paediatric cardiac surgeon, explained the background to the Listening Events and why we had decided to change the format. He highlighted the key work from previous events:

# Clinician view (15 responses 60% adult 40% paeds)

## What do you do currently?

- Refer to nurse led support
- Do it myself
- Refer to CAMHS but long waiting lists

## 3 most common areas for support?

- Parental Anxiety
- Coping with procedures
- Telling my child about surgery

## Are there areas that psychological support would benefit you and or your team?

- Debrief
- Supervision
- Talking to young people about end of life and bereavement



# The proposed approach (July 2017)

# Establishing a tiered approach to psychological support

- Patients to find the support they need when they have questions or concerns
- Clinicians to direct patients to appropriate care and support when needed
- Equitable access to specialist care across the network to those in greatest need



# The Challenge - Developing the model

Resources for all clinicians and families (32 toolkits, support digibook, 9 visual pathways)

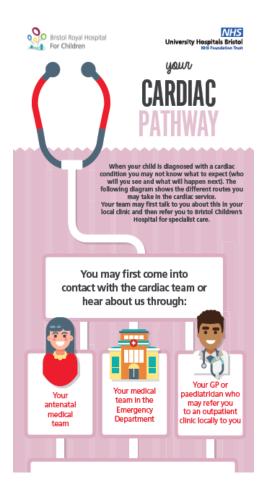
Embedding psychology in existing clinics, teaching training and consultation

Targeted 1:1 Support

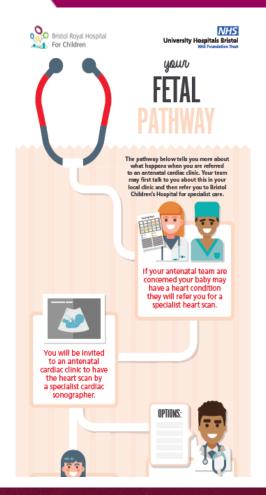


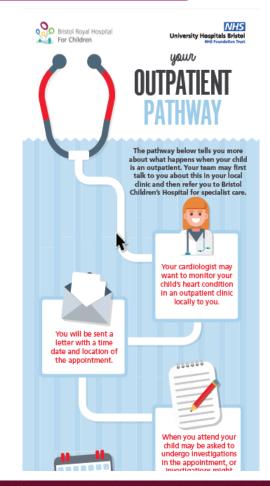
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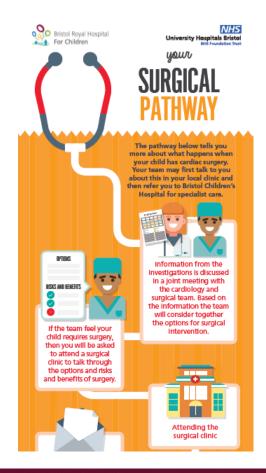
## Resources available to all clinicians and families (32 toolkits, support digibook, visual pathways)



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## Resources available to all clinicians and families (32 toolkits, support digibook, visual pathways)





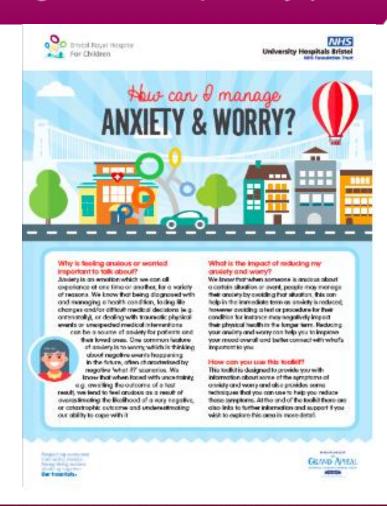
When you first find out your child is ill, you are likely to feel worried about many things. How will your child be affected? What sort of future will they have? How will your life change? What should you

tell friends and relatives? Some parents also feel angry, lonely, depressed and unable to cope.

Remember, it is natural to have these feelings. It may help to

think about how you have come through difficult situations in the past. What are the strategies that you have used before when you have been worried? Which of these could you use now?

This toolkit is designed to help you cope with these difficult feelings that may arise and help you realise the importance of looking after yourself as well as your child.



Hospitals Bristol



When a newborn baby needs intensive care many parents can worry that they are missing out on early bonding experiences. The birth experience and/or condition of the baby at birth may mean that you haven't been able to have skin-to-skin contact or to share the first feed you had been

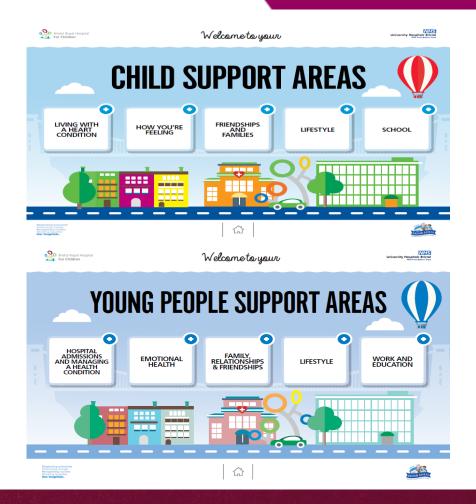
hoping for.

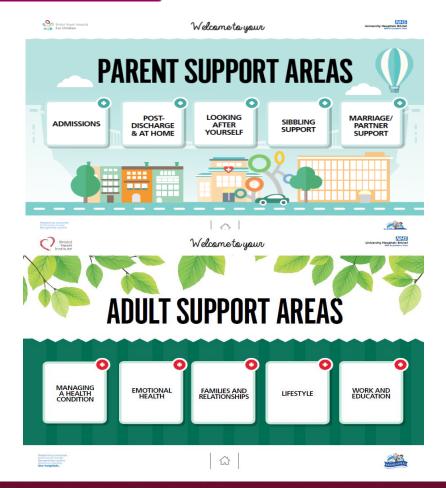
This toolkit is designed to give you some information about bonding and help you to develop your confidence in bonding with your baby while they are in intensive care. We hope it

will reassure you that, although it might look a bit different to how you imagined, bonding continues throughout your baby's stay in intensive care.

By using this toolkit to develop your confidence, we hope you will feel less worried about bonding and will be able to enjoy the interactions that you can have with

# Resources available to all clinicians and families (32 toolkits, support digibook, visual pathways)







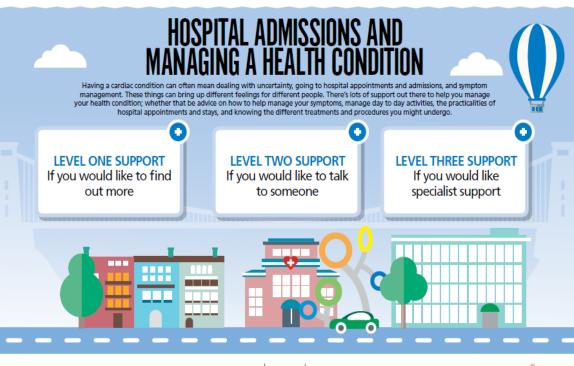


## Resources available to all clinicians and families (32 toolkits, support digibook, visual pathways)



Welcome to your











## **LEVEL 1 SUPPORT**

If you would like to find out more about being admitted and managing a health condition:

- British Heart Foundation site for young people has lots of helpful information about hospital admissions and managing your health condition - www.yheart. net |They provide information on:
- · Preparing for surgery https://www.bhf.org.uk/heart-health/children-andyoung-people/heart-conditions-in-young-people/preparing-for-surgery
- Transitioning from children's to adults services https://www.bhf.org.uk/ heart-health/children-and-young-people/heart-conditions-in-young-people/ the-journey-from-child-to-adult-care
- Understanding your heart condition https://www.bhf.org.uk/heart-health/ children-and-young-people/heart-conditions-in-young-people
- You can visit your local hospital's website, so you know where you are going and what it is like:
- · Bristol Heart Institute http://www.uhbristol.nhs.uk/patients-and-visitors/ your-hospitals/bristol-heart-institute-clinical-services/
- . The Heath in Cardiff http://www.cardiffandvaleuhb.wales.nhs.uk/our-
- · Royal Cornwell Hospitals in Truro https://www.royalcornwall.nhs.uk/
- · Royal Devon and Exeter trust http://www.rdehospital.nhs.uk/
- Musgrove Park Hospital in Taunton http://www.tsft.nhs.uk/
- Great Western Hospital in Swindon http://www.gwh.nhs.uk/
- Gloucestershire Royal Hospital http://www.gloshospitals.nhs.uk/
- Torbay and South Devon Trust https://www.torbayandsouthdevon.nhs.uk/
- The hospital online toolkits aim to answer common questions that you might have about managing a health condition and hospital admissions. They outline different topics and provide helpful ideas, top tips, and strategies for

- I'm transitioning to adult services and don't know what will happen
- Cardiomyopathy Association Provide information and support for people with cardiomyopathy. You can visit their website for:
- Useful information regarding cardiomyopathy http://www. cardiomyopathy.org/cardiomyopathy-information/cardiomyopathy-
- Contacting young peer support volunteers and finding out how to join their online Facebook group - http://www.cardiomyopathy.org/youngpeople/young-peer-support-volunteers-
- · Going to support Groups and speaking to other young people who have had similar experiences can be helpful. Some websites where you can find more information on support groups include:
- · The Somerville Foundation who have information on being young with a cardiac condition and they also have an active support group - http:// www.thesf.org.uk/16-24/
- · They also provide comic books that you can read about growing up with a heart condition - http://www.thesf.org.uk/16-24/comic-books.
- . They also run events for people with a congenital heart disease who are ages 16-24. It's a great opportunity to meet other people, share experiences and get support - http://www.thesf.org.uk/16-24/
- Meet@teenheart You can sign up to meet@teenheart if you want to meet other young people (13-19 year olds) with a heart condition. By signing up you can also participate in events to help you build your confidence, communication and leadership skills. - https://www.bhf.org. uk/heart-health/children-and-young-people/heart-conditions-in-youngpeople/meet-at-teen-heart



# Resources available to all clinicians and families (32 toolkits, support digibook, visual pathways)

#### Services available across Wiltshire:

Services available	e across write	mile.				
Service	Location (town/city)	Geographic al boundaries	Referral criteria	See adults/children with health conditions?	Local recommended services for emotional health	Information about service/contact details:
Marlborough community CAMHS and Marlborough house inpatient unit *	Marlboroug h	covers North and East Wiltshire excluding Swindon - part of a group of CAMHS covering Swindon, Wiltshire, Bath and North East Somerset	https://www.ox fordhealth.nhs. uk/children- and-young- people/south- west/child-and- adolescent- mental-health- services-camhs- tier-2- 3/referrals- criteria/	We see any children with significant mental health difficulties and this can include co-morbid physical health conditions, however we would not see them for the psychological aspects of the physical health condition if they did not have symptoms of a significant mental health difficulty	Locally we have Relate, school counselling, NSPCC and a variety of private practitioners	01865 904666     obmh.marlboroughcamhs@nhs.net     https://www.oxfordhealth.nhs.uk/children-and-young-people/young-people/south-west/wiltshire/marlborough-camhs/
Melksham community CAMHS*	Melksham					01865 903777     obmh.MelkshamCAMHS@nhs.net     https://www.oxfordhealth.nhs.uk/children-and-young-people/young-people/south-west/wiltshire/melksham-camhs/
Salisbury community CAMHS*	Salisbury					01722 336262 ext 2779     obmh.salisburycamhs@nhs.net     https://www.oxfordhealth.nhs.uk/children-and-young-people/young-people/south-west/wiltshire/salisburycamhs/
Swindon Community CAMHS, outreach service and	Swindon	We cover the town of Swindon only and	We see adults (over age 16) registered with a GP practice in	We see adults with health conditions and are currently offering an expansion project with	Some services that we commonly signpost to include: MIND Swindon, CRUSE	01865 903422     camhs.swindon- admin@oxfordhealth.nhs.uk     https://www.oxfordhealth.nhs.uk/childre



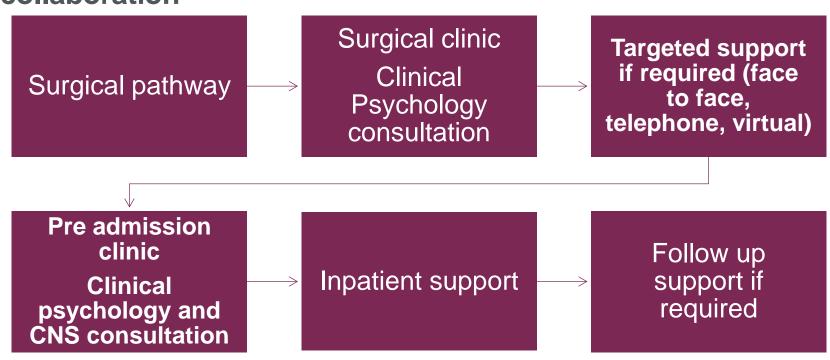
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# **Surgical pathway**

Embedding psychology in existing clinics, teaching training and consultation

Putting psychologists into existing clinics, is this a better model?

- Medical and psychological collaboration
- More families seen
- Time effective
- Preventative
- Reduces referral time
- Reduces travel time

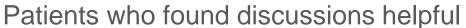


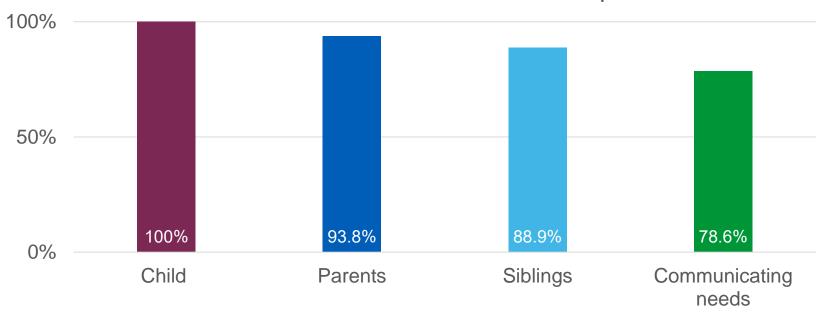


# From surgical clinic

Embedding psychology in existing clinics, teaching training and consultation

"Lots of ideas and suggestions...Lots of support and info for parents. Has made a massive difference to us, it's brilliant."







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Meeting

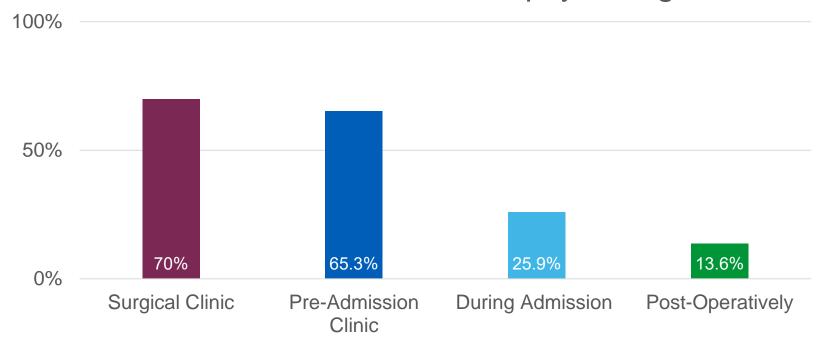
national

# **Preventative maybe?**

Embedding psychology in existing clinics, teaching training and consultation

"very informative, exceeded my expectations"

Patients who saw a clinical psychologist





# The balance of referral and treat vs integrated models

- Lose 6/8 one-hour outpatient appointments
- Lose capacity to offer more in-depth sessions
- Gain seeing 10-12 patients routinely
- Psychology becomes normal component of surgical journey



## What do we offer in 2018?



Face to face

Telephone

Virtual clinic

- 10 outpatient clinics offered a week with 32 appointment slots in total
- 8 inpatient clinics with 12 appointment slots in total

Pathway	Outpatient Face to Face	Outpatient Telephone	Inpatient
Fetal	1 clinic ( 3 slots)	1 clinic (3 slots)	1 clinic (2 slots)
Catheter	1 clinic ( 3 slots)	1 clinic (3 slots)	1 clinic (2 slots)
Surgical	1 clinic (3 slots)	1 clinic ( 2 slots)	2 clinics (4 slots)
ACHD	3 clinics (11 slots)	2 clinics (4 slots)	4 slots



## **Referral Criteria**

Targeted 1:1 Support

- Difficulty in coping with or adjusting to health condition/status e.g. further cardiac surgery required, poor prognosis, long hospital admission life limiting illness, significant impact on day to day functioning
- Distress related to a long hospital admission for their cardiac condition
- Distress associated with physical issues such as scars and symptoms such as pain, cyanosis, breathlessness, and tiredness.
- Trauma associated with past medical interventions(e.g. MRI, CT scan, ICD implantation, Catheter implantation, Cardiac surgery) and hospital and needle phobia.
- Anxiety related to a high risk pregnancy
- Anxiety related to upcoming medical procedures
- Additional needs (including learning disabilities) requiring additional support when accessing treatment



## How to refer?

Targeted 1:1 Support

## Year One

- Via cardiac nurse specialist teams
- Level one centre cardiologist
- Vis electronic referral system

Year Two – review





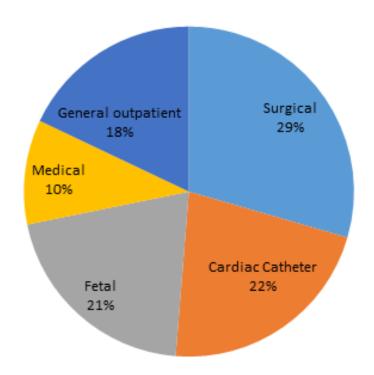






# 1:1 support – Paeds data

Referrals via Service Order October 2017 - March 2018



Pathway	No of referrals
Surgical	23
Catheter	17
Fetal	16
Medical	8
General outpatient	14
Total	78

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# Case study –Paeds

## Reasons for referral to Psychology

- Parents were very anxious about their unborn baby's heart condition (information from HeartSuite: multiple VSDs, DORV mitral aortic discontinuity, LSVC to CS, TAPVD? stenosed PVs? Lympangectasia)
- Parents live in Barnstaple, opted for telephone appointments rather than coming to Bristol for face-to-face appointments

# Type of input

- Telephone appointments offered to parents prior to induction of labour
- Sadly the baby died a few hours after birth; parents returned home the same weekend
- Telephone appointments continued weekly to support parents processing the loss



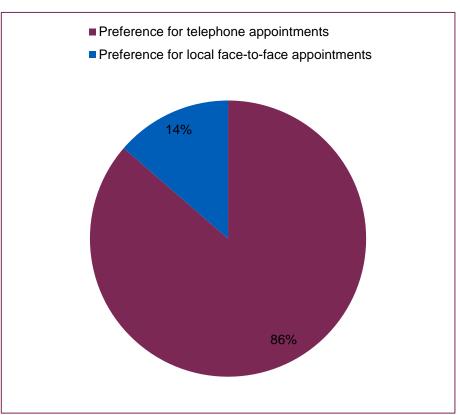
# Offering telephone clinics

## Summary telephone appointments (6 MONTHS)

- 68 people referred (⅓ inpatients, ⅓ outpatients face-to-face, ⅓ outpatients telephone)
- Outpatients who live outside of BristoL
  - 86% preferred telephone appointments
  - 14% declined telephone appointments, opting for local faceto-face support

## General feedback around telephone appointments

- Parents feedback that whilst they would have preferred to see a cardiac clinical psychologist, they opted to see a general clinical psychologist as they can be seen face-to-face
- Many parents said they are glad that Psychology can be offered via telephone so that they do not have to travel to Bristol to speak with a clinical psychologist



Thank you for everything and thank you for being you. 80 worderful and caring. 80

Lots of love,

Megan X.

10,

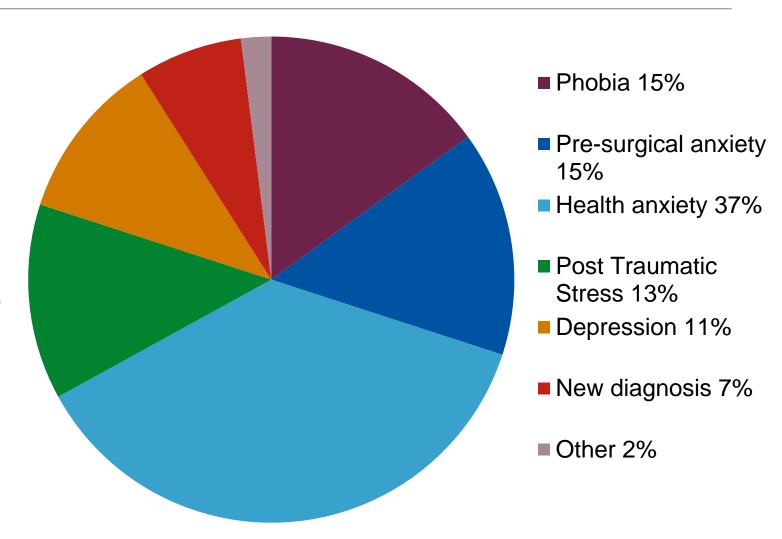
Thank you for being there to support me at the most difficult point in my life. Normally, id really try to bothe feel, but i'm so glad you called me and im so glad answered the phone and chatted to you. Just being there to tack to me has meant so much and also just taking the time to come and find me wherever, I was in the hospital. Thank you! I think parents really do tend to forget about themselves at times like this and its so nice to have such lovely people like yourself there for us.

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# 1:1 support – ACHD

- 69 referrals since Sept 2017
- 73% opted in for treatment
- 89% outpatients -11% inpatients
- 63% female
- On average 6 sessions





## Feedback- ACHD

Snapshot - 8 patients asked to complete the Experience of Service Questionnaire (ESQ+)

- 100% reported finding the help they received good
- 100% reported finding the sessions helpful

## Comments included:

- "Michelle is very good at explaining the impact of all 'things' that affect mental health".
- "The problems I worried about were treated very seriously".
- "Was helpful and helped me through my surgery".
- "They listened to me with care and did not judge".
- "It is a relief to know this service is now available for CHD patients".







Seamless care